SAO 240 (Rev. 10/03) UNITED STATES DISTRICT COURT District of APPLICATION TO PROCEED Plaintiff WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT V. CASE NUMBER: 2:06 CV 748 - MET Defendant declare that I am the (check appropriate box) petitioner/plaintiff/movant ☐ other in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion. In support of this application, I answer the following questions under penalty of perjury: Are you currently incarcerated? ZZYes □ No (If "No," go to Part 2) If "Yes," state the place of your incarceration Are you employed at the institution? NO_ Do you receive any payment from the institution? Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions. Are you currently employed? ☐ Yes If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. JUN 9 2003 Hollon Homes Inc., Highway 80 East Selma, A136701- 4700- 61-In the past 12 twelve months have you received any money from any of the following sources? 3. Business, profession or other self-employment a. ☐ Yes Rent payments, interest or dividends ☐ Yes Pensions, annuities or life insurance payments ☐ Yes ANO Disability or workers compensation payments đ. ☐ Yes Z No e. Gifts or inheritances 1 Yes ☐ No f. Any other sources ☐ Yes

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

A O 74	0 Paverse (Pey 10/03)
Blo Or	I receive a gift from my Uncle Lovie and aunt Ramona ankenship of \$25.00 per month for hygein products and writing supplies,
4.	Do you have any cash or checking or savings accounts?
	If "Yes," state the total amount.
5.	Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value?
-	If "Yes," describe the property and state its value.
6.	List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.
I de	clare under penalty of perjury that the above information is true and correct.
<u>0</u> E	3/17/06 James & Huffman
	Date // Date

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

M/D-6

		TIMEO
IN THE UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF ALABAMADIVISION	FOR THE 2006 11 16 22	2 A 9 31
James G. Huffman	DEBI U.S MiD	15 (A)
Plaintiff(s)	LV 74	8 - MEF
Southern Health Partners, Shentf Herbie Schnson, Larry Nixon, etal. Defendant(s)		
MOTION TO PROCEED IN FORMA PAUPE	ERIS	

moves this Honorable Court for an order allowing her/him to proceed in this case without prepayment of fees, costs, or security therefor, and for grounds therefor submits the attached sworn affidavit in support of the motion.

Autauga Metro Jail

Receipt # 8076 User: TONYA

02/03/2006 8:39:23 AM

76393 (HUFFMAN, JAMES)

[Birth: 10/29/1953 Location: ASO MALE-D4 401B]

To Medical From 76393 (HUFFMAN, JAMES)-RX# 6003290-**FLUOCETINE** ON 02-02-06

Bill Receipt (A/P)	\$3.00
Unpaid Balance:	\$3.00
Cash Balance:	\$18.15

Signed	:		

Autauga Metro Jail

Receipt # 7946 User: TONYA

01/31/2006 9:50:44 AM

76393 (HUFFMAN, JAMES)

[Birth: 10/29/1953 Location: ASO MALE-D4 401B]

To Medical From 76393 (HUFFMAN, JAMES)-RX#6003290 **FLUOCETINE 20** ON 01-20-06

Bill Receipt (A/P)	\$3.00
Unpaid Balance:	\$3.00
Cash Balance:	\$18.15

Signed	:
--------	---

Autauga Metro Jail

Receipt # 7944 User: TONYA

01/31/2006 9:49:43 AM

76393 (HUFFMAN, JAMES)

[Birth: 10/29/1953 Location: ASO MALE-D4 401B]

To Medical From 76393 (HUFFMAN, JAMES)--RX#6003288 LOVASTATIN 40 MG ON 01-20-06

Bill Receipt (A/P)	\$3.00
Unpaid Balance:	\$3.00
Cash Balance:	\$18.15

Signed:						



Receipt # 7983 User: TONYA

01/31/2006 10:44:27 AM

76393 (HUFFMAN, JAMES)

[Birth: 3/29/1963 Location: ASO MALE-D4 401B]

To Medical From the HUFFMAN, JAMES)--RX #-6001826

AMITRIPTYL NE ON 01-23-0€

Dill Dogg st. 1/2	\$3.00
Bill Receipt : 4/2 Unpaid Balance	\$3.00
Cash Balance	\$18.15
Cash Delance	

Signed:	
_ •	